

## PART B - FEE(S) TRANSMITTAL

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7590

02/27/2004

GOOK MCFARRON & MANZO LTD  
200 WEST ADAMS STREET  
SUITE 2850  
CHICAGO, IL 60606

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Cristine M. Noll

(Depositor's name)

*Cristine M. Noll*

(Signature)

May 21, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/262,657	03/04/1999	SHUNPEI YAMAZAKI	SEL-126	9735

TITLE OF INVENTION: SEMICONDUCTOR DEVICE AND METHOD FOR MANUFACTURING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	05/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PRENTY, MARK V	2822	257-059000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Cook, Alex, McFarron,  
Manzo, Cummings & Mehler,  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
Ltd.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Semiconductor Energy  
Laboratory Co., Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 50/1039 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

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01 FC:1501

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